

Nomination for the Iven C. Kincheloe Award

		Nominee			
Full Name:					
Title:	Organization:				
Phone:	Email:				
SETP Membership Grade (req'd):	Fellow	Associate Fellow	Member	Associate Member	
Summarize the nominee's outstanding professional accomplishment in the conduct of flight testing (<i>Limit to 150 words</i>):					
	1	st Reference			
Full Name:	SETP Membership Grade (not req'd):				
Title:					
Phone:	Organization: Email:				
	2	nd Reference		D	
Full Name:	SETP Membership Grade (not req'd):				
Title:	Organization:				
Phone:		Email:			
		Nominator			
Full Name:		SETP Member	rship Grade (not req'o	d):	
Title:	Organization:				
Phone:		Email:			
Affiliation with Nominee:					
Signature:		Date:			

Narrative of Outstanding Professional Accomplishment

Detail the nominee's outstanding professional accomplishment in the conduct of flight testing. The accomplishment—or at least a significant phase of it—must have occurred during the past year (1 July to 1 July) and must have involved flight testing conducted by the individual as a test pilot while in the conduct of an aerospace flight program. *(Limit to 500 words.)*

To place a nomination, submit this two-page document by mail or email. The nomination must be received by SETP by the deadline indicated in the nomination information.

setp@setp.org Phone: 1.661.942.9574

The Society of Experimental Test Pilots P. O. Box 986 Lancaster, CA 93584-0986